

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L26763**

(7)

1. Corporation Name

NDK INVESTMENT CORP.



Principal Place of Business

**C/O ST INTERNATIONAL
941 NW 19TH AVENUE SUITE 301
FT LAUDERDALE FL 33304
US**

Mailing Address

**2400 E COMMERCIAL BLVD
SUITE 204
FT LAUDERDALE FL 33308
US**

2. Principal Place of Business

2a. Mailing Address

21 **9941 SW 4th Street**

26 **941 SW 4th Street**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Plantation, FL**

28 **Plantation, FL**

24 **33324** 25 **USA**

29 **33324** 30 **USA**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
10/30/1989

3a. Date of Last Report
06/19/1995

4. FEI Number
65-0248790

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**HASAN, OSAMAH
941 NE 19TH AVENUE
SUITE 301
FT. LAUDERDALE FL 33304**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and filer, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PT** ☐ DELETE
NAME **KAHOOK, NOFAL**
STREET ADDRESS **2400 E COMMERCIAL BLVD., SUITE 204**
CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE **S** ☐ DELETE
NAME **DAHSHEH, WOEL**
STREET ADDRESS **9005 VINE YARD LAKE DRIVE**
CITY-ST-ZIP **PLANTATION FL**

TITLE **V** ☐ DELETE
NAME **KAHOOK, MOHAMMED**
STREET ADDRESS **11020 SW 54TH STREET**
CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D/P** ☒ Change ☐ Addition
1.2 NAME **Kahook, Nofal**
1.3 STREET ADDRESS **9941 SW 4th Street**
1.4 CITY-ST-ZIP **Plantation, FL 33324**

2.1 TITLE **VP/S** ☒ Change ☐ Addition
2.2 NAME **Dahsheh, woel**
2.3 STREET ADDRESS **1681 NW 100th way**
2.4 CITY-ST-ZIP **Plantation, FL 33322**

3.1 TITLE **T** ☒ Change ☐ Addition
3.2 NAME **Kahook mohammed**
3.3 STREET ADDRESS **9941 SW 4th Street**
3.4 CITY-ST-ZIP **Plantation, FL 33304**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Osamah Hasan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)